FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600006567 (7)

| Principal Place of Business Mailing Address 101 N.E. 3RD AVENUE SUITE 300 FT. LAUDERDALE FL 33301 STUART A. NELSON ATTORNEY AT LAW, P.A. Mailing Address 101 N.E. 3RD AVENUE SUITE 300 FT. LAUDERDALE FL 33301 FT. LAUDERDALE FL 33301 | | | | | | | | | |
|---|--|---------------------|---|--|--|---|--|---|-----------------------------|
| | | | | | | 3. Date incorporated or Qualified 01/22/1996 | 3a. Dai | te of Last R | eport |
| · · · | lace of Business | 2a. Mailing Addre | SS | | | 4. FEI Number 59-2581457 | | | oplied For ot Applicable |
| Suite, Apt | 26 Suite, Apt. #, 4 | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired Service Fee Rec | | | dditional | |
| City & State | 0 | City & State | *************************************** | ······································ | | Election Campaign Financing Trust Fund Contribution | | \$5.00 | May Be |
| 23 Zip 24 | Country 25 | 28 Zip | 30 | Country | · · · · · · · · · · · · · · · · · · · | 8. This corporation has liability for | | | |
| 24 | 9. Name and Address of Cu | | 1001 | | ······································ | 10. Name and Address of New Re | | | |
| NELSON, STUART A | | | | | Name | | | * ************************************ | |
| 101 N.E. 3RD AVE. SUITE 300 | | | | 62 | Street Add | dress (P.O. Box Number is Not Accepta | ble) | | |
| FT. LAUDERDALE FL 33301 | | | | 83 | | | | | |
| | | | | 84 | City | | FL | 85 Zip (| Code |
| agent I a | Signature typed or printed name of registers | | (NOTE Flegi | | | rporation submits this statement for the ation's board of directors. I hereby acceured when reinstating) ADDITIONS/CHANGES TO OFFICE | DATE | | |
| TITLE | D | DEL | ETE 1 | .1 TITLE | | | | Change | Addition |
| NAME | NELSON, STUART | | 1 | 1.2 NAME | | | | | |
| STREET ADORESS | | | | 1.3 STREET ADDRESS | | | | | |
| CITY - ST - ZIP | FT. LAUDERDALE FL | | | .4 City-S | IT - ZIP | | | | |
| TiTLE | | DEI | ETE 2 | 2.1 TITLE | | | | ☐ Change | Addition |
| NAME | | | [2 | 22 NAME | | | | | |
| CHISE LADDRESS | | | | 2.3 STREET | · 1 | | | | |
| CITY - ST - ZIP | | T be | | 2. 4 CITY-5 | ST-ZIP | | ······································ | T Obanos | # dialat |
| TITEF | | ☐ DE | | 3.1 TITLE | | | | Change | Addition |
| NAMÉ CONSTRUCCIONOS | | | | 3.2 NAME | 1000000 | | | | |
| STREET ADDRESS | | | - 1 | | ADDRESS | | | | |
| CHTY - ST - ZIP TITLE | | DEC | | 9.4. CITY - 9 1.1 TITLE | S1-ZIP | | | Change | Addition |
| NAME | | <u> </u> | | . 2 NAME | | | | FILL ASSESSED | |
| STREET ADORESS | | | • | | ADDRESS | | | | |
| CITY: ST-7# | | | 1 | 4.4 CITY-S | 1 | | | | |
| DILE | | DEI | | 5.1 TITLE | 11-211 | | | ☐ Change | Addition |
| NAME | | | B 1 | 5.2 NAME | | | | . = . • . | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| City-St-ZIP | } | | | 5.4 CITY-S | 1 | | | | |
| TITLE | | ☐ DEI | | 6.1 TITUE | | | | Change | Addition |
| NAME | | ··· | | 5.2 NAME | | · | | • | |
| STREET ADORESS | | | • | | ADDRESS | | | | |
| | | | 1 | | | | | | |

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an inadiment with an address.

SIGNATURE:

SIGNATURE AND TYPED OF PHINTED NAME OF SIGNING ON ICER OR DIRECTOR

4/09/97

954-524-9260

FILED

May 15 1997 8:00am

Secretary of State

e Phone #

CR2E034 (9/96)